

Robert E. Bush
Naval Hospital

Don't miss out on the next **Healthcare Consumer Council Meeting**... Let us know what you think!

July 18, at 2:30 p.m. in the Marine Corps Family Team Building Classroom at the Village Center, building 1551.



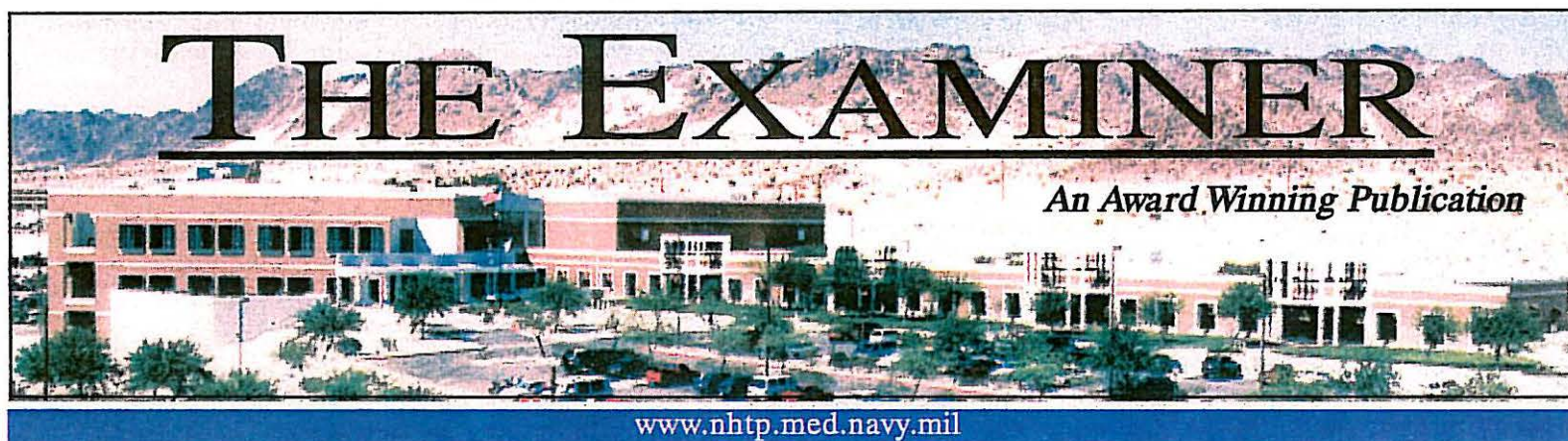
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June was National Home Safety Month and the Safety Council urged all of us to take measures to prevent common hazards such as falls, fires, burns, and poisoning. **page 3**

When I arrived at this command, I circulated the Chaplain Services Survey Sheet to find out what people at this command would like to participate in. **page 6**



www.nhttp.med.navy.mil

Change of Charge at Branch Health Clinic China Lake

NAVAL AIR WEAPONS STATION CHINA LAKE, Calif.— Cmdr. Thomas Driver, officer in charge of the Branch Health Clinic, was relieved from duty by Lt. Cmdr. Cheryl Parham in a Change of Charge Ceremony May 23 at the Paradise Community Center.

During the ceremony, Capt. Mick Gleason, NAWS commanding

Introducing Captain Bruce Laverty, Executive Officer

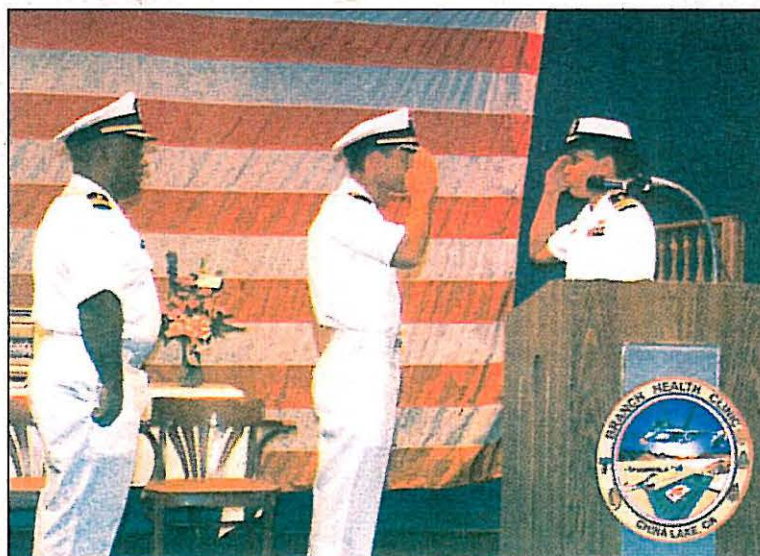


By Dan Barber
Public Affairs Officer
Robert E. Bush Naval Hospital

The Robert E. Bush Naval Hospital welcomes Captain Bruce Laverty as its Executive Officer.

Laverty was born in Rochester, Minnesota but considers Minneapolis as his hometown. He graduated from Abraham Lincoln Sr. High School located at Bloomington, Minn., in June 1978 where he earned membership in the National Honor Society. Laverty competed with his high school swimming team and participated in the school's Concert and Marching Band, where he

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Capt. Mark Bowman (center), commanding officer of the Naval Hospital Twentynine Palms, salutes the Branch Health Clinic's new officer in charge, Lt. Cmdr. Cheryl Parham, while the former officer in charge, Cmdr. Thomas Driver (left) looks on during a Change of Charge Ceremony held at the Paradise Community Center May 23.

officer, thanked Driver and his wife, Shannon, for allowing him to be the guest speaker. He then thanked Capt. Mark Bowman, commanding officer of the Robert E. Bush Naval Hospital at Twentynine Palms, Calif., the clinic's parent command, and Capt. Charles Nixon, head, Naval Hospital Twentynine Palms Emergency Medicine Dept., for the support the clinic gives to the China Lake community on a daily basis. Gleason then turned his remarks to the outgoing officer in charge. "Cmdr. Driver's contributions to the welfare of this base have been substantial. He has expanded medical service throughout our military

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Here's to your health...

Cyber-Safety, For You and For Your Children

By Martha Hunt, M.A. Health Promotions Coordinator
Robert E. Bush Naval Hospital

Summer vacation is in full swing and your kids may spend time home alone surfing the net and looking for all sorts of fun and excitement. Cyber-violence has become a major problem in the US. The focus of most cyber-violence is women and children and takes the form of stalking, mental and emotional abuse, and in extreme cases kidnap, sexual assault and murder.

The issue of social network sites such as myspace has enabled the problem of easy access to children whose parents either allow the use of social networking or are unaware of their child's use of such a site. The FBI estimates that there are over 200 of these free social network sites and sex offenders routinely use these sites to access potential victims and abuse them.

Recent data shows that as many as 1 in 5 children have received an unwanted sexual solicitation via the internet in the past year. One-in three of the children who had received a solicitation were male; the rest were female. Three quarters of the solicitation victims were 14 to 17 years old leaving nearly one quarter under the age of thirteen. This same research study also reports that most children do not report these incidents to their parents or teachers because of fear or embarrassment.

Another startling finding of this research showed that most home computers do not use filtering or child safety software. There are many software programs available and be sure to access one that is appropriate to the age of your child. Younger children will have a harder time disabling the security software than older children who may need stricter software to protect them. The website <http://family-internet.about.com/cs/filtering-software/a/aafiltering.htm> offers a good overview of available filtering software and how to pick one that is appropriate for your

family's needs.

Cyber-violence, like any violence, is really an issue of power. Cyber-stalkers are empowered by the anonymity of the Internet. Since you cannot see them, hear their voice or (usually) trace them, they feel free to say or do as they wish to the inexperienced Internet user.

Cyber-violence is real. What makes it real is that it occurs in one's mind just like any verbal or emotional abuse. The victims of cyber-violence are just as affected by the assault as they would be if the assailant were actually in their home with them. Outcomes of cyber-violence mirror the emotional and physical aspects of post traumatic stress syndrome including sleeplessness, depression, agitation, fear, etc. When cyber-violence crosses the line to real life violence, the results can be deadly.

It is very easy to simply say to the victim, either the child or adult, "simply disconnect the computer when you feel threatened." However, this then places the blame on the victim and denies the fact that many predators, real and cyber, can be very smooth in their approach to the victim. Recently, the little girl in San Diego who was murdered and then explicit images of her posted on the internet knew her predator - he lived next door and her parents socialized regularly with him. She trusted him. The predators who assault children, online as well as in real life, go to great lengths to become friends with the child first and to earn their trust.

Guidelines for defending yourself and your children involve protecting your privacy as best as you can and maintaining open lines of communication with your children as to their online activities. Learning proper "netiquette" (online etiquette) will help you to blend into the social structure of the Internet. If you stand out as being a "newbie," you open yourself as a target to potential abusers.

Always make sure when using any chat related software that your privacy options are enabled as well as logging options. Examples of chat related software are mIRC, ICQ, PIRCH, JAVA, or AOL. By ensuring your privacy options are enabled, a potential abuser cannot track you or identify any personal information about you.

Never use your real name or any personal information about yourself when you set up your chat software. This can sometimes be accessed very easily by anyone on the same net as you, and leave you open to invasion of privacy. Never give anyone any personal information about yourself. This includes photo-

graphs, phone numbers, addresses, and home towns, anything that can identify you. Even the smallest bit of personal information can be used to track who you are in real life.

By ensuring that your logging option is effective, you keep a written record of every conversation you or your child engages in, both in public chat rooms and in private chats. These logs can also be enabled to record time and date stamps and any available identifying information of the chat participants. If you are ever cyber-stalked or abused in any way while online, the logs are written proof that the conversation that took place and who were the participants.

Think of your children on line like this -- if you don't let your child talk to strangers in a shopping mall, why would you let them talk to strangers online? If your kids are using the home computer, place it in a common area of the home. This will enable the child to call for help if they feel threatened and will also allow you as the parent to monitor their activities more easily. If you prefer that your children do not use the chat software on your computer at all, it can be password protected in the software security options. Then only you as the parent knows the password and has

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The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month's edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

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Dehydration... Water, Water... Not Enough Water

By Cmdr. Kathleen Hewitt, CNM/WHNP
Robert E. Bush Naval Hospital

"How can I be dehydrated, when I'm not even thirsty?"

Famous last words of pregnant moms just before they are admitted to the hospital for dehydration. Unfortunately, our thirst mechanism does not always keep up with our need for water, and for many of us, we are not accustomed to the desert and its effects on our bodies and on the condition of pregnancy.

During pregnancy, women should make sure that they are drinking plenty of water as the developing baby places ever greater demands on the mother's body. The baby itself is approximately 70-80 percent fluid, making up tissue, cells, and blood supply. Plus, the placenta and the amniotic fluid that surrounds the baby are almost entirely composed of fluid. Guess who else is about 70-80 percent fluid? Mom is! And the only way baby is going to get the amount of fluid it needs for healthy development is when mom has adequate fluid intake. When mom is behind with her water and fluid intake, it does not take long for baby to become dehydrated as well.

Besides directly affecting the baby's development and environment, if mom does not have enough fluid intake, much of her physical well-being is also directly affected by inadequate amounts of water. Mothers who are not drinking at least 12-15

glasses of fluid a day can experience more nausea and vomiting (you know... "Morning/all day sickness"); muscle cramping (the uterus is a very large muscle and when it cramps, those cramps can become stronger and cause premature contractions which can lead to miscarriage); and more urinary tract infections and constipation.

Breast-feeding mothers need additional water and fluid intake as well, to make an adequate milk supply for that little one. Coping with the demands of a new baby can be tiring, especially if you are breastfeeding. It is really important for mothers to make sure you are eating and drinking properly at this crucial time, so keep a big glass of water close at hand while enjoying the closeness of breast-feeding.

And when mom is busy looking after everyone else, it is often easy to forget to look after yourself. Rushing around, juggling work and home, results in the need for more water to replace that which is lost through perspiration. If you are not drinking enough, headaches and irritability will only add to the pressures of a hectic situation.

We lose water in several ways. In normal weather, we generally take in as much water as we use during normal activity, which is approximately two quarts per day. However, on a daily basis in warm weather, we may still only take in two quarts a day, but we actually lose about three

quarts per day and become dehydrated quickly. Anyone performing prolonged exercise can actually lose up to seven quarts of water each day. Whereas you might not be running a triathlon, near the end of pregnancy when you get into that "nesting" mode, it is absolutely amazing how much work you will do and how quickly you can become dehydrated. In addition to hot weather or exercise, please be aware that prolonged vomiting or diarrhea in pregnancy can cause abnormal water losses and can quickly lead to dehydration.

Unfortunately, we don't store water in our body, so the amount lost every 24 hours must

be replaced to maintain not only your health and well-being, but that of your pregnancy and baby.

Watch for signs that your body needs more water. Symptoms of decreased water volume leading to dehydration:

- * Headache
- * Thirst
- * Nausea
- * Very strong thirst
- * Vague discomfort
- * Loss of appetite
- * Impaired physical performance
- * Difficulty concentrating
- * Dizziness
- * Excess perspiration
- * Extreme fatigue

* Bloating

If you do not experience these symptoms, you can still be at risk for dehydration. Three signs of dehydration for the mom-to-be are:

- Decreased urine output
 - Darker, concentrated urine
 - Not having to urinate when you have gone from Twentynine Palms to Yucca Valley
- Don't wait for the signs, however, because you could need water before you get thirsty. And if you have any concern that you may be dehydrated, seek help immediately. Contact your health care provider, but most importantly, drink water. Remember, you are pregnant,

Emergency and Urgent Care: It Pays to Know the Difference

By Jenna Holtz
TriWest Healthcare Alliance

June was National Home Safety Month and the Safety Council urged all of us to take measures to prevent common hazards such as falls, fires, burns, and poisoning. Of course, the first priority when you or a loved one is injured or sick is to seek help. Knowing what type of help is needed can help TRICARE beneficiaries avoid unnecessary expenses.

What is Urgent Care?

An urgent condition is an illness or injury that won't cause further disability or death if you're not treated immediately, but requires professional attention to prevent it from developing into a greater threat.

Urgent care centers should be used only if your PCM is not available, such as after hours. Regardless, you must still obtain an authorization for urgent care otherwise you will be billed under TRICARE Prime's point-of-service (POS) option, which includes additional cost-shares and a deductible. Examples of urgent care situations include but are not limited to the following:

- * Minor lacerations
- * Urinary tract infections
- * Earache
- * Migraine headaches
- * Sprains

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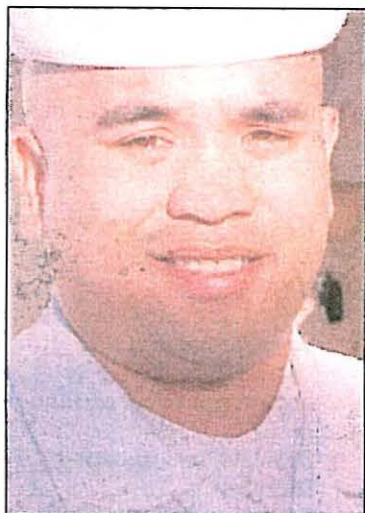
Super Stars



CS2 (SS) Pablo Amezcua, Nutrition Management Dept., receives his third Good Conduct Award.



Lt. Cmdr. Ann Case, Surgical Suite, receives a Navy and Marine Corps Commendation Medal.



HN Darryl Dimaquibo, Pediatrics, receives a Letter of Commendation.



Cmdr. Penny Heisler, Head, Adult Medical Care Clinic, receives a Letter of Appreciation.



Lt. Jennifer Johnson-Patel, Pediatrics, receives a Navy and Marine Corps Achievement Medal.



HN Jerad Jurgensmier, General Surgery Clinic, receives a Flag Letter of Commendation



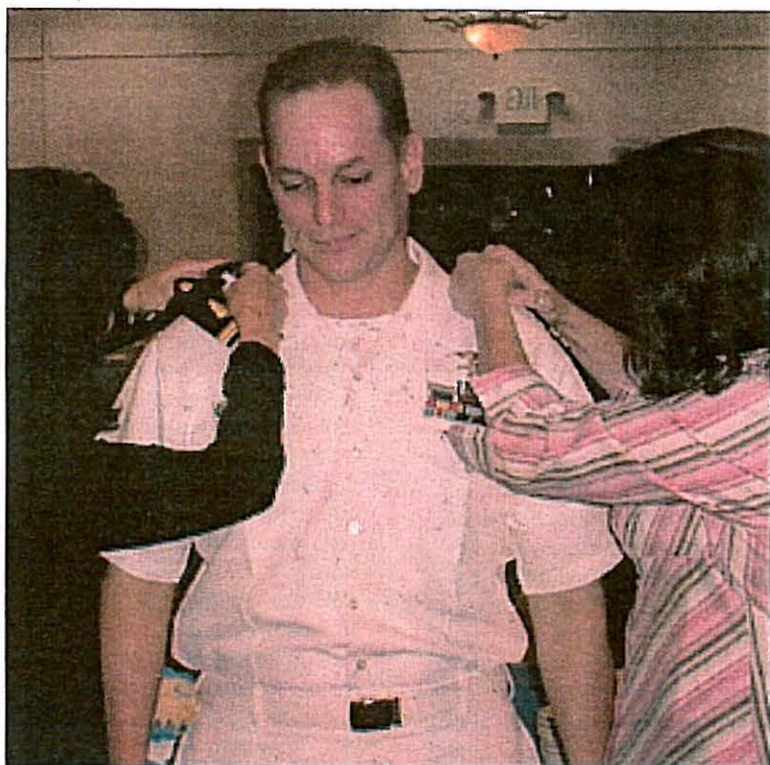
HM2 (FMF) David Toston, right, Preventive Medicine receives his third Good Conduct Award.



HM3 Jonathan Kegley, Staff Education and Training, receives his first Good Conduct Award.



HM3 (SW) Erica Somerville, Fiscal Department, receives her second Good Conduct Medal..



Lt. Cmdr. Richard Salsbury, Emergency Medicine Department, receives his new shoulder boards at his recent promotion ceremony.



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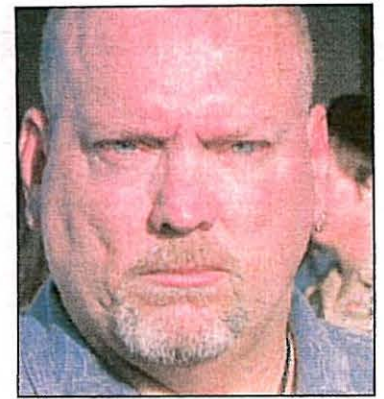
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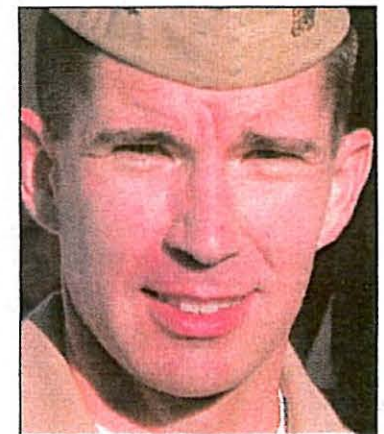
Lt. Holly Lee, Director for Resource Management, is promoted to her current rank.



Lt. Cmdr. Chris Niles, above, Emergency Medicine Department, is promoted to his current rank.



Eric Von Poppen, Health Care Operations, receives a Letter of Appreciation.



Lt. Cmdr. William Warner, right, Obstetrics receives a 3-6-9 Certificate.



HM3 Brett Reinier, Preventive Med Tech, receives his second Navy and Marine Corps Achievement Medal.



HN Nicholas Rutcheda, Adult Medical Clinic, receives his first Good Conduct Award.

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Responding to Another Request from Hospital Staff

By Chaplain Moran
Robert E. Bush Naval Hospital

When I arrived at this command, I circulated the Chaplain Services Survey Sheet to find out what people at this command would like to participate in. The top response that came back was to pray for those who

are deployed at the flagpole the first Friday of the month. I received 92 responses in favor of that. That tells me there are a lot of people at this command who believe in prayer. They not only believe in prayer, but they want to participate in it, and they are willing to tell others that they believe in it, and they are willing to participate in it. I think that is great.

Let me ask you a question: if you knew that God had a telephone number would you call Him up? If you were to talk to Him on the telephone, what would you tell Him? If you were to ask God a question, what would it be? Let me suggest to you that God does have a telephone number so to speak. I will give it to you. It is Jeremiah 33:3 "Call to

me and I will answer you and tell you great and unsearchable things you do not know." Isn't that amazing? That is a wonderful promise. All we need to do is to call out to God in prayer. He promises to answer, and not only that, the promise says that He will "tell you great and unsearchable things you do not know." I think that is totally amazing. It even sparks a desire

for me to call out to God more frequently in prayer. How about you? If you would like to be involved in a small prayer group, please let me know. We can meet in the chapel at various times. It is there for our use. Let's take God up on this promise. I will keep my ears open. I will be listening. You have a great day!

TriWest's \$500,000 Contribution Helps California Kids Cope with Deployment

PHOENIX (June 25, 2007) -- Separated from parents who are defending the nation, the children of military families are also serving America. The separation, fear of losing a parent, and the nagging sense of uncertainty can put a heavy psychological burden on children.

Some 100 military children from Northern California are attending the Purple Camp, June 20th -- 26th at Camp Mendocino 160 miles north of San Francisco, made possible in part by a \$500,000 contribution from Phoenix-based TriWest Healthcare Alliance to the National Military Family Association (NMFA). "Military kids are learning

how to cope with feelings of fear and uncertainty by participating in Operation Purple Camp where staff teaches the skills they need, mixed with a memorable week of the excitement and adventure," said David J. McIntyre Jr., TriWest President and CEO. "I learned that 'home sickness' to them means missing their family more than it means missing a home because they're used to moving from base to base, but they never get used to missing their parents," said Deborah Jaynes, a Northern California, licensed marriage and family therapist who is working at Camp Mendocino. A second camp just wrapped up in San

Juan Capistrano on June 22nd. "The children meet at these summer camps and learn they are not alone in the way they feel," said McIntyre. "They also learn from camp counselors how to express and deal with their anxieties. Plus, they have a lot of well-deserved fun." As part of their ongoing commitment to provide a complete continuum of care for America's military families, TriWest is proud to be a primary sponsor of the Operation Purple Camps in California.

There are, says NMFA, 220,000 children who have a parent absent, and 3,500 of them ages 7 to 18 will participate in one of 34 Purple Camps held in

26 states this summer. **About TriWest Healthcare Alliance** TriWest Healthcare Alliance partners with the Department of Defense to do "Whatever It Takes" to support the health care needs of 2.9 million members of America's military family. A Phoenix-based corporation, TriWest provides access to cost-effective, high-quality health care in the 21-state TRICARE West Region. TriWest is a proud Corporate Team Member of America Supports You. Visit www.triwest.com for more information.

Association is the only national organization whose sole focus is the military family and whose goal is to influence the development and implementation of policies that will improve the lives of the families of the seven uniformed services. For more than 35 years, its staff and volunteers, comprised mostly of military family members, have built a reputation for being the leading experts on military family issues.

About NMFA
The National Military Family

Emergency and Urgent Care...

Continued from page 3

* Rising fever

A beneficiary may appeal the payment of a claim under the POS option if they believe the care was an emergency.

How is Emergency Care Different?

TRICARE defines an emergency as a medical condition that a "prudent layperson" -- someone with an average knowledge of health and medicine -- believes could threaten life, limb or eyesight without immediate treatment. If you feel the situation requires immediate medical treatment, or there are painful symptoms requiring immediate attention to relieve suffering, the situation is an emergency. Examples of emergency situations include but are not limited to the following:

- * Severe bleeding
- * Chest pains
- * No pulse
- * Inability to breathe
- * Spinal cord or back injury
- * Severe eye injuries
- * Broken bones

In an emergency, you should call 9-1-1 or go to or be taken to the nearest emergency room for treatment. You or someone on your behalf need to contact your primary care manager (PCM) or TriWest within 24 hours if the emergency room visit results in an impatient admission, so ongoing care can be coordinated.

For more information about TRICARE benefits, please visit www.triwest.com or call 1-888-TRIWEST (874-9378).



Recently frocked Petty Officers pose for a group photo in front of the hospital... those being frocked are: HM1 Amy Hendrick; CS2 Kaydine Erksine; HM2 Nicholas Klamar; HM2 Oneika Mccallaflowers; CS2 Lance Negaard; HM2 Kristine Obedoza; HM2 Christopher Valentin; HM3 Erika Abarca; HM3 Alexander Alvareznunez; HM3 Paul Cohran; HM3 Noemi Coler; HM3 Elvia Cook; HM3 Joaquin Cruz; CS3 Marvinco Decastro; HM3 Darryl Dimaquibo; HM3 Loc Do; HM3 Michael Hart; HM3 John Henley; HM3 Michael Hernandez; HM3 Piotr Juchniewicz; CS3 Rachel Kaiser; HM3 Janerwin Maddela; HM3 Jason Pajarillo; CS3 Danylle Patterson; HM3 Nicholas Rutchen; HM3 James Schiwart; HM3 Devin Schmidt.

Cyber-Safety...

Continued from page 2

access to the chat software.

If for some reason you do decide to meet someone in real life that you have developed a relationship with online, never meet them at your home or theirs. Always choose a safe, public place to meet and always

have a "safe call." That means that a friend knows exactly where you are and with whom, that you have the phone number of the person you are meeting, and you have pre-arranged to call that friend at a specific time and let them know you are safe.

This way, if you fail to make the "safe call," your friend can notify authorities. If the person you are meeting refuses to give you their home phone number, refuse to meet them. Children should never meet anyone in real life that they have met online period!

If you feel you are a victim of cyber-violence you do have options. Some forms of cyber-violence such as hacking or damaging another's machine are federal offenses and are reportable to the FBI. Also, report the incidents to your Internet Service Provider (ISP).

This is when you need to access the logs you have recorded when you enabled the logging option in the chat software. Sometimes you need to be persistent when reporting to the FBI or to your ISP. They receive so many complaints that they become overloaded with them and may not readily respond to your complaint. If it is proven that a specific individual has committed a crime, then they will be banned forever from service with that ISP. If the cyber-stalker somehow gets your phone number or address and threatens you in real life,

report it to your local police. Many states, including California, have begun to enact cyber-violence laws and all 50 states have stalking laws.

The Internet can afford incredible growing experiences. Not all people online are evil stalkers or pedophiles. You can meet and talk to people from all walks of life and from all corners of the globe. However, you must also use an extreme degree of caution when dealing with anyone online to ensure your own safety as well as that of your children.

China Lake...

Continued from page 1

community by implementing new management techniques and has discovered new opportunities to create efficiencies and facilitate urgent care," said Gleason. "His focus on the Sailor and their professional development is also worth of note. Tommy's team has performed spectacularly. Your innovative style has led the clinic to new heights of success and it's been a pleasure watching your team excel."

Before leaving the podium, Gleason welcomed Parham aboard, noting he was looking forward to having her as part of the China Lake community.

Capt. Mark Bowman, thanked Driver for his efforts during the past three years, noting Driver had not only met, but exceeded, his expectations. He then presented Driver with a Meritorious Service Medal for the many accomplishment he performed at China Lake. Accomplishments included going to telepharmacy, integration of Dental and Medical and successful partnering with the Tri-West care team, base and tenant commands.

"You will be missed," said Bowman. "Thank you for a job well done."

Driver noted that his speech was very hard for him because the last three years had all been about relationships -- relationships with NAWS, the Tri-West team, Naval Hospital Twentynine Palms, the local community and with the staff as a whole. While he thanked many people by name, he noted he could mention many more, but time didn't allow him that privilege, noting that this staff was the best he had had in his entire career.

Driver refused to say goodbye, noting that the Navy was a very small community, giving exam-

ples of past working relationships he and others have had with current staff and parent command.

Driver and Parham then read their orders and Parham relieved Driver as officer in charge.

The new officer in charge then addressed the audience.

"This day is not merely another important milestone in my career," Purham said. "It is the beginning of a new era of leadership for the Branch Health Clinic as well. This day brings about a new beginning and will forever be a part of our history, yours and mine. . . . Being entrusted with this position of leadership tells me that people believe in my abilities as a leader and I hope not to disappoint. Therefore, I stand here today completely humbled, delighted and thankful for this opportunity. . . . I ask that you continue to give me your support as we continue to maintain a remarkable facility for our patients."

Senior Chief Fire Controlman Mark Meyer, USN (Ret), gave the invocation and benediction.

Introducing Captain Bruce Lavery...

Continued from page 1

played the trumpet.

He then entered college at Gustavus Adolphus College at St. Peter Minn., where he graduated Magna Cum Laude with a Bachelor of Arts in Biology in 1982. He also competed here with the college swim team.

Lavery then entered Medical School at the University of Minnesota, graduating from there in 1987.

He then was encouraged to join the Navy, to pay for his medical education, by his uncle, a Navy Dentist. So he joined under the Health Professions Scholarship Program. "The Navy has allowed me to pursue my interest in administrative and executive medicine while maintaining my clinical skills as an Anesthesiologist," said Lavery.

According to the new XO, his prescription for successful lead-

ership is "knowing the people you're leading and then doing everything in your control to support their efforts." He added, "We all come from a lot of different backgrounds, communities, and training experiences so if I can better understand the background that forms a person's view on the world then I think I can apply that knowledge to the combined betterment of the command."

"I believe that people come to work everyday with the intention of doing their best, I think it's a leader's job to facilitate those intentions. I like to walk

around and talk to people in their work spaces because it is a more natural setting for the individual to tell it like it is vice the individual coming to the front office."

"I naturally trust people and believe they are trying to help me as much as I try to help them. We all want to be heard, once that is established it is a lot easier to lead," said Lavery.

When he's not busy with his work, the Captain enjoys spending time with his family, road biking and hiking.

Welcome Aboard!

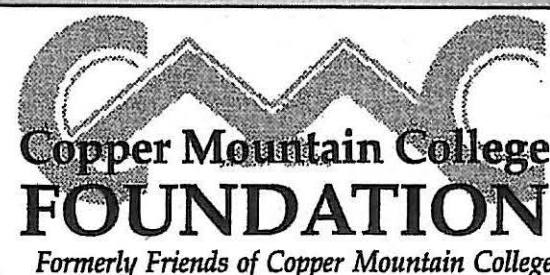
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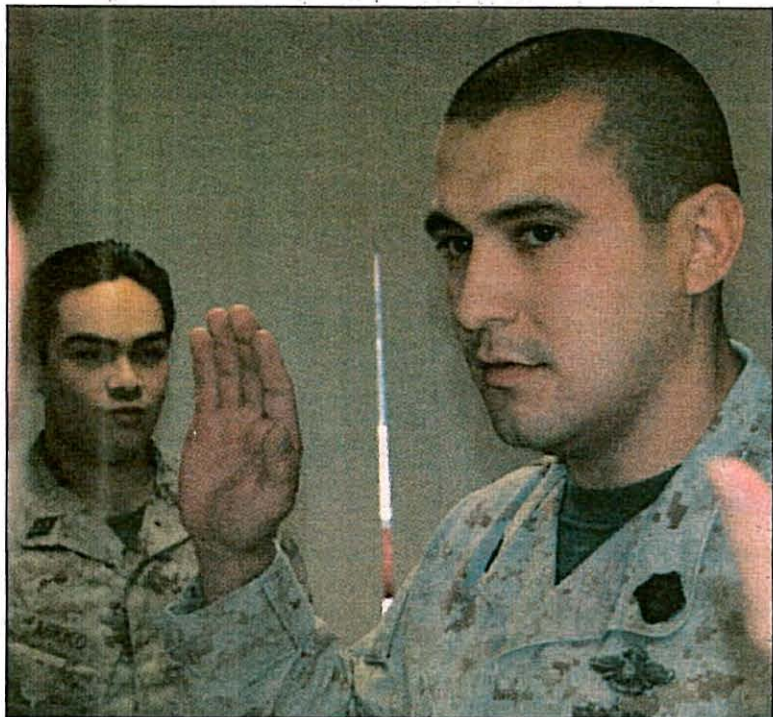


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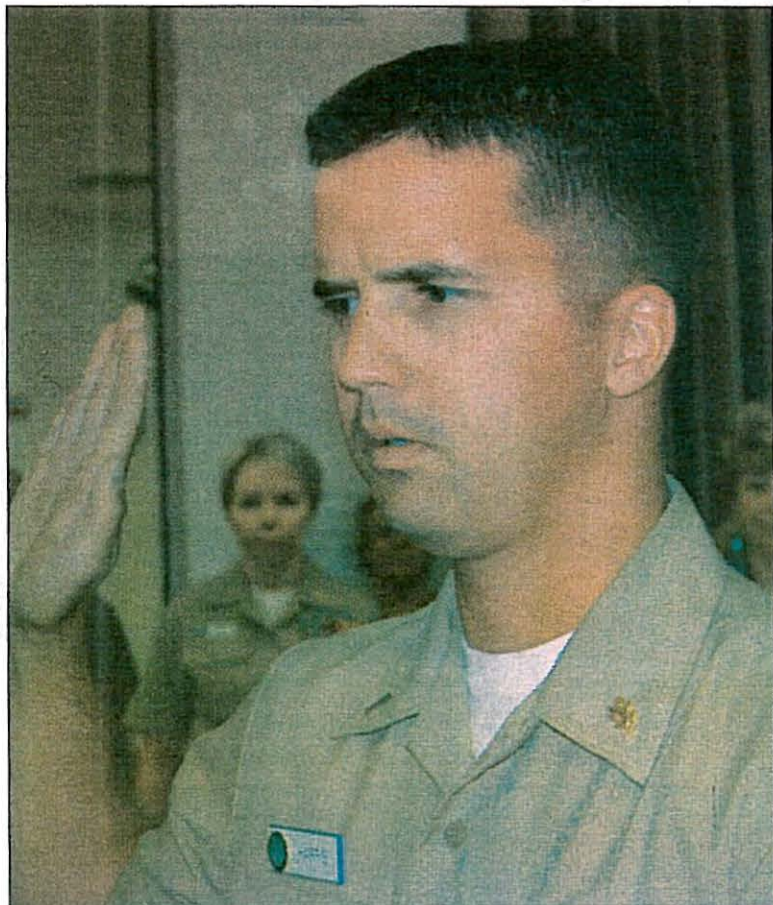
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Super Stars




HM2 Douglas Ayala, Outpatient Administration, takes the oath during his recent reenlistment ceremony.



Lt. Paul Harris, Physical Therapy Department, takes the oath at his recent promotion ceremony.



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